

THE JOHN G. WILLIAMS SCHOLARSHIP FOUNDATION
SUPPLEMENTAL APPLICATION

THIS APPLICATION IS TO BE COMPLETED ONLY BY STUDENTS WHO RECEIVED FINANCIAL ASSISTANCE FROM THE JOHN G. WILLIAMS SCHOLARSHIP FOUNDATION IN THE IMMEDIATELY PRECEDING ACADEMIC YEAR. (IF THERE WAS A GAP OF ONE OR MORE YEARS FROM THE TIME OF THE LAST SCHOLARSHIP AWARD TO THE CURRENT APPLICATION, THEN THE FULL STANDARD APPLICATION MUST AGAIN BE COMPLETED.)

P. O. Box 1229, Camp Hill, PA 17001-1229; Telephone 717-795-9880, ext. 225
www.jgwfoundation.org

SUBMISSION DEADLINE – JUNE 15

APPLICANT

Legal Name (First Middle Last) _____ Female Male
Birth Date (mm/dd/yyyy) ____/____/____ SSN# ____-____-____ Email _____
Preferred Telephone Home Cell Home (____) _____ Cell (____) _____
Permanent Home Address _____

PAST RECIPIENT INFORMATION

Please list the years (the most recent year listed first) and amounts of all prior financial assistance from The John G. Williams Scholarship Foundation:

Academic Year: _____	Award Received: \$ _____
Academic Year: _____	Award Received: \$ _____
Academic Year: _____	Award Received: \$ _____
Academic Year: _____	Award Received: \$ _____

FUTURE PLANS

College Graduate school in which you are enrolled for the upcoming academic year _____

Incoming Freshman Sophomore Junior Senior Graduate Student year _____
Major/Intended Major _____ Anticipated Graduation Year _____
Academic Interests _____
What is the highest degree you intend to earn (i.e., long-term academic plans/goals)? _____
Career Interests _____

ANNUAL UPDATE

Education

○ College ○ Graduate school attended this past academic year: _____
Major: _____ Declared Yet? ○ Yes ○ No
Minor(s): _____
Degree being sought: _____ Anticipated Graduation Year: _____
GPA this past academic year: _____ Cumulative GPA: _____

Academic Honors/Awards

List academic distinctions, honors, and awards received during this past one academic year:
Honor _____ Date (mm/yyyy) _____

Work Experience

List all jobs (including summer employment) for the last calendar year:

Employer	Position Held	Dates	Hrs/Wk	
_____	_____	_____	_____	○ School Yr ○ Summer
_____	_____	_____	_____	○ School Yr ○ Summer
_____	_____	_____	_____	○ School Yr ○ Summer
_____	_____	_____	_____	○ School Yr ○ Summer

Extracurricular Activities

List all extracurricular activities (sports, music, arts, theatre, clubs, organizations, community/volunteer, etc.) in which you participated this past calendar year, *in order of importance to you*:

Activity	Leadership, if any	Dates	Avg Hrs/Wk Spent
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other – any other updated information that we should be aware of? _____

FAMILY

Household

Parents' Marital Status (relative to each other): ○ Married ○ Never Married ○ Civil Union/Domestic Partners
○ Widowed ○ Separated ○ Divorced

With whom do you make your permanent home? ○ Parent 1 ○ Parent 2 ○ Both ○ Legal Guardian
○ Other (explain) _____

Please list both parents below, even if one or more is deceased or no longer has legal responsibilities toward you.

Parent 1: Father Mother Unknown
Is Parent 1 living? Yes No (Year Deceased _____)

Parent 2: Father Mother Unknown
Is Parent 2 living? Yes No (Year Deceased _____)

Name _____

Name _____

Home Address (if different from you):

Home Address (if different from you):

Preferred Telephone: Home Cell Work
(_____) _____

Preferred Telephone: Home Cell Work
(_____) _____

Email: _____

Email: _____

Occupation: _____

Occupation: _____

Employer: _____

Employer: _____

Siblings:

How many? _____ Age(s)? _____

If any siblings will be in high school for the upcoming academic year, what grade(s)? _____

If any siblings will be in college for the upcoming academic year, what year(s)? _____

REFERENCES

Name	Address	Telephone
_____	_____	_____
Reference from <input type="radio"/> School <input type="radio"/> Work <input type="radio"/> Other		

_____	_____	_____
Reference from <input type="radio"/> School <input type="radio"/> Work <input type="radio"/> Other		

This form is intended to collect information about your background, interests, and your plans. If appropriate, we encourage you to provide any other additional information and/or a resume that will help us know you better as a person and as a student.

The undersigned hereby makes application to The John G. Williams Scholarship Foundation. I understand the conditions and qualifications under which its scholarship loans are awarded, and authorize the Board of Trustees of The John G. Williams Scholarship Foundation to make any necessary inquiries as to any information I have included in this application.

Signed _____

Dated _____